## 2004 FOR PROFIT CORPORATION

## May 05, 2004 8:00 am Secretary of State **ANNUAL REPORT**

04-22-2004 90007 050 \*\*\*150.00

DOCUMENT # F02893 WRIGHT MARITIME CORPORATION, INC. Principal Place of Business Mailing Address %THE SHIP'S CHANDLER % THE SHIPPS CHANDLER 66419183 646 E. HWY. 98 646 E. HWY. 98 DESTIN, FL 32541 DESTIN, FL 32541 01162004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-2059471 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent WRIGHT: PETER DO NOT WRITE 646 E. HWY. 98 DESTIN, FL 32541 IN THIS SPACE ripose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME WRIGHT, PETER W STREET ADDRESS 646 E HWY 98 CITY-ST-ZIP DESTIN, FL 32541 IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with ay address, with all other like empoyaged.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Dete

Daytime Phone #